

COUNTY MEDICAL SERVICES PROGRAM  
1800 THIRD STREET, ROOM 100  
P.O. BOX 942732  
SACRAMENTO, CA 94234-7320  
(916) 322-1478



CMSP Letter No. 03-03  
Issue Date March 18, 2003

TO ALL COUNTY WELFARE DIRECTORS

SUBJECT: COUNTY MEDICAL SERVICES PROGRAM  
PHARMACY PROGRAM CHANGES

Beginning April 1, 2003, County Medical Services Program (CMSP) prescription drug benefits will be provided under a contract with MedImpact Healthcare Systems, Inc. (MedImpact), a pharmacy benefit management company. CMSP clients with the primary aid codes of 84, 85, 88, 89, and 50 will be affected and receive their prescription drug benefits through this contract. **The purpose of this letter is to explain how this change will affect CMSP clients and county welfare department processing of CMSP eligibility.**

Pharmacy Benefit Identification Card. CMSP clients will receive a separate MedImpact/CMSP pharmacy benefit identification card (issued by MedImpact) in addition to their standard Benefits Identification Card (BIC). While this card is solely for identification purposes, it is intended to assist clients in obtaining their prescription benefits. CMSP clients should keep this card and present it at the pharmacy, along with their BIC, whenever they get a prescription. A sample of the card is attached for your information.

New CMSP Drug Formulary. MedImpact will process all CMSP claims for prescription drugs according to a new CMSP Drug Formulary. This formulary provides a list of covered medications and emphasizes the use of generic medications where available and clinically appropriate. It will also require prior authorization approvals and other utilization controls for certain medications. The contract with MedImpact **will not** affect the current method of providing medical supplies (i.e., diabetic and incontinent supplies) to CMSP clients. The CMSP Drug Formulary can be found at the CMSP Governing Board's website at:  
[http://www.cmspcounties.org/about/abt\\_pres\\_drug\\_ben.htm](http://www.cmspcounties.org/about/abt_pres_drug_ben.htm).

Appeals and Fair Hearings. If a client's prescription cannot be approved, MedImpact will contact the client and the client's medical provider. The client and/or the client's medical provider can appeal any disapproval to MedImpact, which will follow established guidelines for processing appeals.

Modified Network of Pharmacy Providers. All of the pharmacies that will be available to CMSP clients through the MedImpact pharmacy network are pharmacies that participate in the Medi-Cal program. In addition, most of these pharmacies already serve CMSP clients. A listing, by county, of all pharmacies participating in the network is available on the CMSP Governing Board's website at [http://www.cmspcounties.org/about/abt\\_pres\\_drug\\_ben.htm](http://www.cmspcounties.org/about/abt_pres_drug_ben.htm). County welfare departments are encouraged to assist CMSP clients in obtaining needed prescription drug benefits by providing clients with a copy of the listing of pharmacies in their county that they can use to obtain benefits.

Exception for Certain Solano County CMSP Clients. The contract with MedImpact **will not** affect the delivery of prescription drug benefits to CMSP clients with primary aid codes of 84 and 88, under county code 48, and who are participating in Solano County's Partnership HealthPlan of California. All other CMSP aid codes in Solano County will be impacted, as indicated in this letter.

Immediate Need Approvals Require FAX to MedImpact. For CMSP clients approved through Immediate Need processing, the county welfare department will need to fax a Member Add Form to MedImpact at (858) 578-2135. This form will serve to certify initial eligibility and allow MedImpact to input this information into their system in order to allow for timely processing of a prescription submitted by a CMSP client. **Welfare departments are asked to complete this form and fax it to MedImpact no later than one hour following completion of Immediate Need processing.** Enclosed are two camera-ready copies of the Member Add form that can be used by the county to reproduce an adequate supply.

No Change to Overall Eligibility Processing. Other than the change required for Immediate Need processing and providing the client with pharmacy benefit information, as described in this letter, the county welfare department shall continue to process CMSP eligibility in accordance with existing eligibility policy and procedures.

To provide you with additional information regarding implementation of this contract, we have also enclosed copies of the following:

- MedImpact Formulary Advisory to pharmacy network providers

CMSP Welfare Directors  
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- Letter from MedImpact to CMSP clients (March 2003, month of eligibility)

Letter from CMSP to providers in the 34 CMSP counties, in addition to those in Alameda, Contra Costa, Fresno, Placer, Sacramento, San Diego, San Francisco, Tulare, and Yolo Counties.

Counties are encouraged to establish their own procedures to implement the necessary county actions described in this letter. If you or your CMSP clients need additional information regarding the CMSP prescription drug benefit, please contact the MedImpact Customer Service Help Desk at (800) 788-2949. If you have questions regarding CMSP or this notice, please contact the CMSP Unit at (916) 322-1478.

Sincerely,



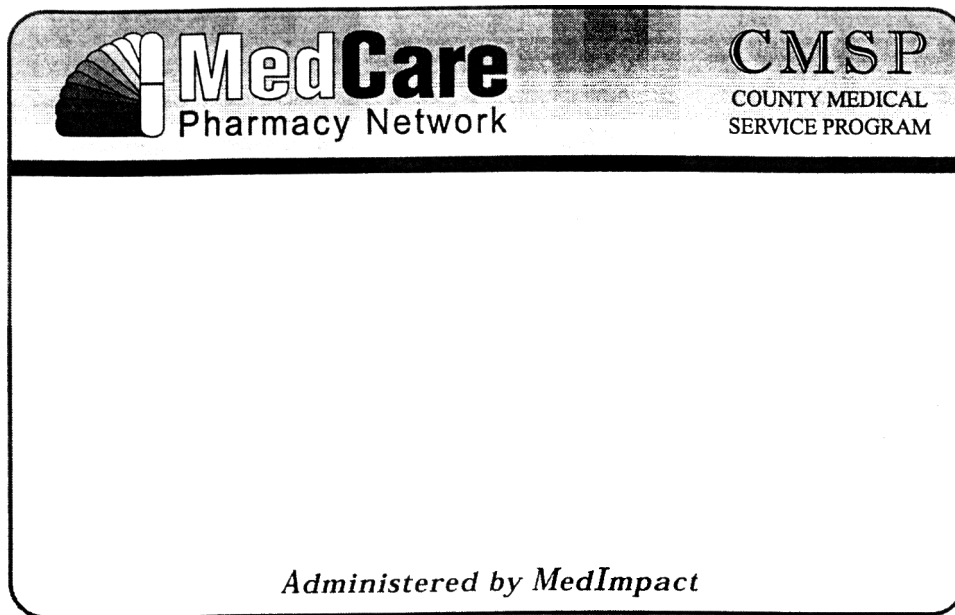
William L. Alameda, Chief  
County Medical Services Program Unit

Enclosures

cc: Mr. Lee Kemper  
Administrative Officer  
CMSP Governing Board  
770 L Street, Suite 1100  
Sacramento, CA 95814

Mr. Michael Lewandowski  
Account Manager  
MedImpact Healthcare  
Systems, Inc.  
10680 Treena Street, Fifth Floor  
San Diego, CA 92131

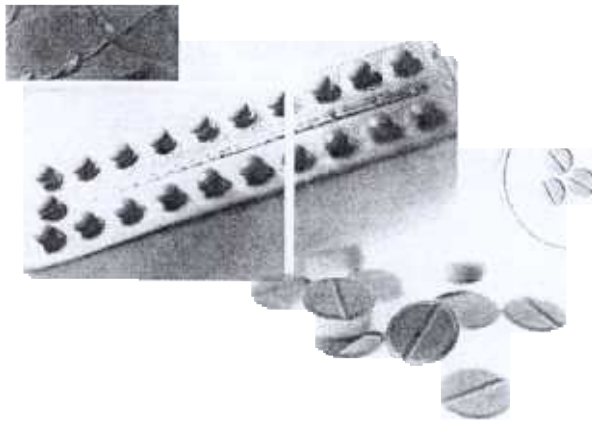
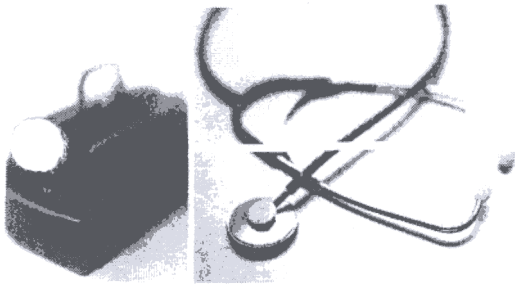
Ms. Cathy Salenko  
General Counsel, CMSP  
Governing Board  
McDonough, Holland,  
and Allen  
555 Capitol Mall, Suite 950  
Sacramento, CA 95814



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Back



# CMSP

COUNTY MEDICAL  
SERVICES PROGRAM

## CMSP Prescription Drug Benefit Member Add Form (Immediate Need)

Fax To 858-578-2135

Carrier HQ: CMSP 1

STREET:				*EFFECTIVE DATE: *     /     /	
CITY:				COUNTY NAME:	
STATE:				*COUNTY CODE:*	
ZIP CODE:				*AID CODE:*	
REL	*LAST NAME*	*FIRST NAME*	*SEX *	*DOB*	*MEMBER CIN #:*
INS=01				/   /	
*Does this member have a SOC requirement?    Yes <input type="checkbox"/> No <input type="checkbox"/>					

COMPLETED BY: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE # \_\_\_\_\_  
 \* - MANDATORY fields. All other fields need to be filled out as necessary according to Plan needs.

Solano and Sonoma Counties Only. To expedite processing, do not wait for the CIN # to be issued before submitting this member add form to MedImpact. Please fax immediately and no greater than 1 hour from granting of eligibility to MedImpact.

Solano County Only – Partnership HealthPlan of California Members. Only send this form for Solano County CMSP clients with primary aid codes of 85, 89, and 50. *Do not* send this form for Solano County CMSP clients with primary aid codes of 84 and 88 who are members of the county's Partnership HealthPlan of California (PHC).

## Formulary Advisory

The County Medical Services Program (CMSP) will be changing its drug formulary on April 1, 2003.

### Continuity-of-Care

- From April 2003 through June 2003, patients will be permitted to continue using medications that are restricted or nonformulary.
- Pharmacists processing prescriptions for restricted or nonformulary medications during this 3-month grace period will receive a computerized warning to convert

patients to formulary alternatives. Pharmacists should use this opportunity to recommend conversion to formulary agents.

- To improve continuity-of-care, physicians are encouraged to be proactive in addressing formulary changes with their patients.

**Please note that CMSP requires the use of generic products if available.**

**Formulary alternatives for common drug classes are listed below:**

### Formulary Alternatives

#### Anti-Ulcer Preparations

Carafate  
Cytotec  
Maalox  
Mylanta  
Tagamet  
Zantac

#### Protonix (restricted)

#### NSAIDs

Anaprox  
Anaprox DS  
Aspirin  
Clinoril  
Disalcid  
Feldene  
Indocin (except suppositories)  
Indocin SR  
Lodine  
Motrin  
Nalfon  
Naprosyn  
Trilisate  
Voltaren

#### Arthrotec (restricted)

#### Lodine XL (restricted)

#### Oruvail (restricted)

#### Relafen (restricted)

#### Lipotropics

Lescol  
Lescol XL  
Lipitor  
Lopid  
Mevacor  
Niacin  
Niaspan  
Questran  
Questran Light

#### Antihistamines

Atarax  
Benadryl  
Chlortrimeton  
Periactin  
Phenergan  
Polaramine  
Vistaril

#### Alavert/Claritin (PA required)

#### Allegra (PA required)

#### ACE Inhibitors

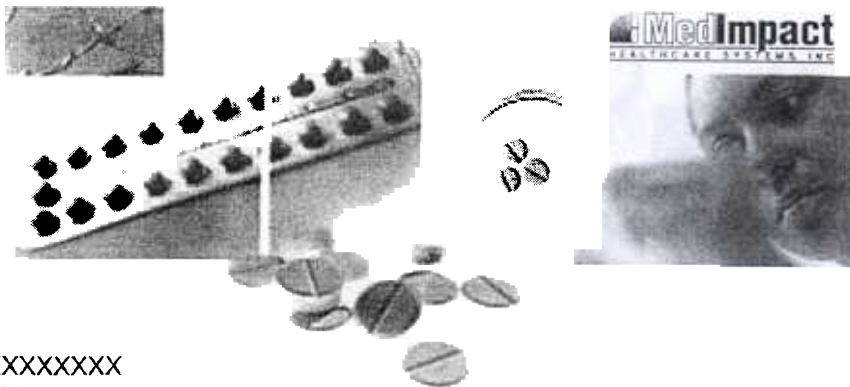
Capoten  
Vasotec  
Prinivil  
Zestril



CMSP's complete drug formulary is available online at  
[www.cmspcounties.org/about/abt\\_pres\\_drug\\_ben.htm](http://www.cmspcounties.org/about/abt_pres_drug_ben.htm)

# CMSP

COUNTY MEDICAL  
SERVICES PROGRAM



XXXXXXXXXX POSTNET BARCODE XXXXXXXXXXXX  
XXXXXXXXXXXXXXXXX NAME XXXXXXXXXXXXXXXX  
XXXXXXXXXXXXXXXXX ADDRESS LINE 1 XXXXXXXXXXXX  
XXXXXXXXXXXXXXXXX ADDRESS LINE 2 XXXXXXXXXXXX  
XXXXXXXXXXXXXXXXX CITY, STATE, ZIP XXXXXXXXXXXX

Dear CMSP Member,

The County Medical Services Program (CMSP) and MedImpact Healthcare Systems, Inc. (MedImpact) are pleased to provide you with your new prescription drug benefit card. When your doctor gives you a prescription, this card will help you get the prescription filled at a local pharmacy that is a part of MedImpact's pharmacy network.

**Beginning April 1, 2003, you will need to keep this card with you and present it to your pharmacy when you fill a prescription.** You will also need to present your (State of California) Benefits Identification Card when you receive pharmacy and other health benefits.

To fill a prescription, you will need to go to a local pharmacy that is in MedImpact's pharmacy network. Most of the pharmacies that have provided prescription drugs to CMSP members in the past are a part of this network. To find a pharmacy near you, please contact the MedImpact Customer Service line at 1-800-788-2949 or log on to [http://www.cmspcounties.org/about/abt\\_pres\\_drug\\_ben.htm](http://www.cmspcounties.org/about/abt_pres_drug_ben.htm).

Your county eligibility worker may also be able to assist you.

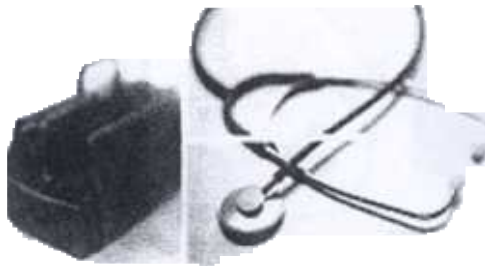
*Aqui esta su nueva tarjeta de identificacion para su beneficios de medicina de CMSP. Quando su doctor le de una prescripcion, esta tarjeta le ayudara a recibir su prescripcion en una farmacia local que sirve a los miembros de CMSP. Si necesita asistencia para encontrar una farmacia serca de usted o tiene otras preguntas acerca de su beneficios llame 1-800-788-2949.*

Sincerely,

County Medical Services Program and  
MedImpact Healthcare Systems, Inc.

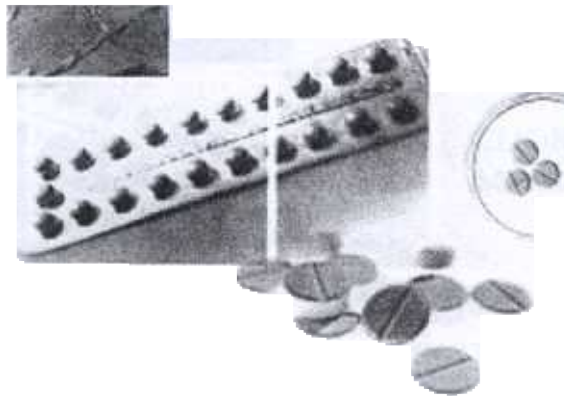
Please see important information on reverse side





# CMSP

COUNTY MEDICAL  
SERVICES PROGRAM



**MedImpact**  
HEALTHCARE SYSTEMS, INC.



**The County Medical Services Program (CMSP) is pleased to present you with your new ID card. Beginning April 1, 2003, your prescription drug benefits will be administered by MedImpact.**

## **Prescription Drug Benefit Coverage**

When you need to get a prescription filled, present your ID card to your local pharmacy that is a part of the MedImpact network. If you have a share-of-cost for your CMSP benefits, the pharmacy will handle your payment in the same way your payments have been handled in the past.

## **Finding a Local Pharmacy**

Most of the pharmacies that have provided prescription drugs to CMSP members in the past are a part of the MedImpact network. To find a pharmacy near you, please call the MedImpact Customer Service line at 1-800-788-2949 or go to the website listed at the bottom of the page. Your county eligibility worker may also be able to help you.

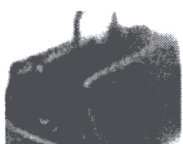
## **Customer Service**

If you have questions about getting your prescription filled, please call MedImpact's help desk at 1-800-788-2949 during the following hours:

Monday – Friday	5 a.m to 10 p.m.
Saturday	6 a.m. to 7 p.m.
Sunday	7 a.m. to 7 p.m.

If you have other questions about CMSP, call 1-916-322-1478, Monday through Friday, between 8 a.m. and 5 p.m.

For more information about your prescription drug benefit, go to:  
[http://www.cmspcounties.org/about/abt\\_pres\\_drug\\_ben.htm](http://www.cmspcounties.org/about/abt_pres_drug_ben.htm)





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March 18, 2003

TO: COUNTY MEDICAL SERVICES PROGRAM (CMSP) PROVIDERS

SUBJECT: CMSP PHARMACY PROGRAM CHANGES

Effective for dates of service on or after April 1, 2003, CMSP prescription drug benefits will be provided under a contract with MedImpact Healthcare Systems, Inc. (MedImpact), a pharmacy benefit management company.

MedImpact will process all CMSP claims for prescription drugs, including legend and non-legend drugs. The CMSP Drug Formulary provides a list of covered medications and outlines those medications that may be provided without prior authorization and those that require prior authorization. Thus, it is important that prescribing providers are familiar with this formulary. Prescription drug coverage provided by CMSP will emphasize the use of generic medications, where available and appropriate, and will require prior authorization and other utilization controls for selected medications based upon clinical efficacy, medical necessity, and cost. The CMSP Drug Formulary can be found at the following website:

[www.cmspcounties.org/about/abt\\_pres\\_drug\\_ben.htm](http://www.cmspcounties.org/about/abt_pres_drug_ben.htm)

To provide you with additional information, we have enclosed a copy of the CMSP Formulary Advisory. This advisory describes the CMSP formulary alternatives for common drug classes and outlines how continuity-of-care will be addressed during the transition to the new drug formulary.

CMSP clients with the following primary aid codes will receive prescription drug benefits through MedImpact: 84, 85, 88, 89 and 50. CMSP clients with these aid codes will receive a separate MedImpact/CMSP pharmacy benefit identification card (a sample of which is enclosed).

This contract with MedImpact **will not** affect the delivery of prescription drug benefits to CMSP clients with primary aid codes of 84 and 88, under county code 48, who are

CMSP Providers

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participating in Solano County's Partnership HealthPlan of California. In addition, medical supplies provided to CMSP clients will continue to be billed to Electronic Data Systems (EDS) without changes in current coverage or authorization.

If you need additional information regarding the CMSP prescription drug benefit, please contact the MedImpact Customer Service Help Desk at (800) 788-2949. If you have questions regarding CMSP, please contact Mr. William L. Alameda, Chief, CMSP Unit, at (916) 322-9470.

Sincerely,



Nancy E. Hayward, Chief  
Medically Indigent Services Section

Enclosures